Case 17-21274 Doc 1 Filed 07/18/17 Entered 07/18/17 10:01:54 Desc Main Document Page 1 of 53

| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| t 1: Identify Yourself | | | |
|---|---|--|---|
| | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | | | |
| Write the name that is on | Farnardo | | |
| picture identification (for example, your driver's | First name | | First name |
| license or passport). | Middle name | | Middle name |
| Bring your picture | Anderson | | |
| meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | | Last name and Suffix (Sr., Jr., II, III) |
| | | | |
| All other names you have used in the last 8 years | | | |
| Include your married or maiden names. | | | |
| | | | |
| Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-7195 | | |
| | Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Anderson Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number About Debtor 1: Farnardo First name Anderson Last name and Suffix (Sr., Jr., II, III) | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Anderson Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number Xxx-xx-7195 |

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Case number (if known)

Debtor 1 Farnardo Anderson

| | | About Debtor 1: | Ab | out Debtor 2 (Spouse Only in a Joint Case): | |
|----|---|---|--------|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | 0 | ☐ I have not used any business name or EINs. | |
| | Include trade names and doing business as names | Business name(s) | Bu | siness name(s) | |
| | | EINs | EIN | Ns | |
| 5. | Where you live | 4220 W Carroll Ave Bsmt Apt | If C | Debtor 2 lives at a different address: | |
| | | Chicago, IL 60624 Number, Street, City, State & ZIP Code | Nu | mber, Street, City, State & ZIP Code | |
| | | Cook | | | |
| | | County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | in | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Nu | mber, P.O. Box, Street, City, State & ZIP Code | |
| 6. | Why you are choosing this district to file for | Check one: | Ch | eck one: | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | I have another reason. Explain. (See 28 U.S.C. § 1408.) | |
| | | | | | |

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Document Case number (if known) Debtor 1 Farnardo Anderson

| ar | t 2: Tell the Court About | Your I | Bankruptcy Ca | se | | | | | |
|------------|--|--|---|--|--|--|--|--|--|
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | |
| | choosing to file under | ☐ Chapter 7 | | | | | | | |
| | | | Chapter 11 | | | | | | |
| | | | Chapter 12 | | | | | | |
| | | | Chapter 13 | | | | | | |
| | | | | | | | | | |
| 3. | How you will pay the fee | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. | | | | | | | |
| | | | | the fee in installments. If ye in Installments (Official For | | e this option, sign | n and attach the Applica | ation for Individuals to Pay | |
| | | | I request that but is not requ applies to you | t my fee be waived (You ma | ay request may do so able to pay | only if your inco the fee in instal | ome is less than 150% of liments). If you choose | of the official poverty line that this option, you must fill out | |
|) . | Have you filed for bankruptcy within the last 8 years? | □ N | | | | | | | |
| | | | District | Northern District of Illinois Eastern Division | When | 4/30/15 | Case number | 15-15407 | |
| | | | District | Northern District of Illinois Eastern Division | When | 9/18/14 | Case number | 14-33966 | |
| | | | District | Northern District of Illinois Eastern Division | When | 9/20/12 | Case number | 12-37399 | |
| | | | | | | | | | |
| 10. | Are any bankruptcy | ■ N | lo | | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ПΥ | | | | | | | |
| | | | Debtor | | | | Relationship to y | | |
| | | | District | | When | | Case number, if | | |
| | | | Debtor | | \A# | | Relationship to y | | |
| | | | District | | When | | Case number, if | known | |
| <u> </u> | Do you rent your | | lo. Go to li | ne 12. | | | | | |
| | residence? | _ · | l las | ur landlord obtained an evict | tion judgme | ent against you a | and do you want to stay | in your residence? | |
| | | 1 | es. , | No. Go to line 12. | . • | - , | | • | |
| | | | _ | Yes. Fill out <i>Initial Statemer</i> | nt About ar | n Eviction Judam | ent Against You (Form | 101A) and file it with this | |
| | | | | bankruptcy petition. | | | J | , | |

Document Page 4 of 53 Case number (if known) Debtor 1 Farnardo Anderson Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? ☐ Yes. Name and location of business A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes.

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Farnardo Anderson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 53 Case number (if known) Debtor 1 **Farnardo Anderson Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Farnardo Anderson Signature of Debtor 2 **Farnardo Anderson** Signature of Debtor 1 Executed on July 18, 2017 Executed on

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Farnardo Anderson Page 7 of 53 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Mehul [| D. Desai | Date | July 18, 2017 |
|-----------------|------------------------|---------------|---------------------------|
| Signature of | Attorney for Debtor | | MM / DD / YYYY |
| Mehul D. [| Desai | | |
| Printed name | | | |
| Swanson | & Desai, LLC | | |
| Firm name | | | |
| 2314 W No | orth Ave Unit C-1W | | |
| Chicago, I | L 60647 | | |
| Number, Street, | City, State & ZIP Code | | |
| Contact phone | 312-666-7882 | Email address | kswanson@swansondesai.com |
| 6296214 | | | |
| Bar number & St | tate | | |

| | 17(7(.1111) | <u> </u> | |
|--------------------------|-------------------|-------------------------------------|---|
| mation to identify your | case: | | |
| Farnardo Anders | on | | |
| First Name | Middle Name | Last Name | |
| | | | |
| First Name | Middle Name | Last Name | |
| ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| | | | |
| | First Name | First Name Middle Name Middle Name | First Name Middle Name Last Name Middle Name Last Name |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a | ssets of what you own |
|-----|--|--------------|-------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 1,375.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 1,375.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 21,198.64 |
| | Your total liabilities | \$ | 21,198.64 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,913.08 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,763.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other scl | nedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 1,581.75 \$ 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cla | im |
|--|-----------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 7,299.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 7,299.00 |

| | | | Documer | of Page 10 of 53 | | |
|----------------|---------------|---|---|--|----------------------------|--------------------------------------|
| Fill in | this info | rmation to identify yo | ur case and this filing: | | | |
| Debto | or 1 | Farnardo Ande | rson | | | |
| | | First Name | Middle Name | Last Name | | |
| Debto | | First Name | Middle News | Last Name | | |
| (Spous | e, if filing) | First Name | Middle Name | Last Name | | |
| Unite | d States B | ankruptcy Court for the | : NORTHERN DISTRICT OF | FILLINOIS | | |
| Cono | numbor | | | | | П о |
| Case | number | | | | | ☐ Check if this is an amended filing |
| | | | | | | amonaca ming |
| | | | | | | |
| <u>Offi</u> | cial Fo | orm 106A/B | | | | |
| ScI | hedu | le A/B: Pro | perty | | | 12/15 |
| | | | <u>. </u> | ce. If an asset fits in more than o | ne category, list the asse | |
| think it | fits best. | Be as complete and acc ore space is needed, atta | urate as possible. If two married | people are filing together, both a On the top of any additional pag | re equally responsible fo | or supplying correct |
| Allowe | every que | ssuon. | | | | |
| Part 1 | Describe | e Each Residence, Build | ing, Land, or Other Real Estate Y | ou Own or Have an Interest In | | |
| 1. Do y | you own or | have any legal or equita | able interest in any residence, bu | ilding, land, or similar property? | | |
| | | | | | | |
| | No. Go to Pa | | | | | |
| Пλ | es. Where | is the property? | | | | |
| Part 2 | Describ | e Your Vehicles | | | | |
| | | | | | | |
| | | | | cles, whether they are registe | | ny vehicles you own that |
| somec | one eise di | rives. If you lease a ver | nicle, also report it on Schedule | e G: Executory Contracts and U | nexpirea Leases. | |
| 3. Ca ı | rs, vans, t | rucks, tractors, sport | utility vehicles, motorcycles | • | | |
| , | | | | | | |
| | | | | | | |
| | Yes | | | | | |
| | | | | | Do not doduct socur | ed claims or exemptions. Put |
| 3.1 | Make: | Hyundai | Who has an interes | st in the property? Check one | the amount of any se | ecured claims on Schedule D: |
| | Model: | Sonata | Debtor 1 only | | Creditors Who Have | Claims Secured by Property. |
| | Year: | 2002 | Debtor 2 only | | Current value of the | |
| | | | □ Debtor 1 and De | | entire property? | portion you own? |
| | Other info | imation: | At least one of th | e debtors and another | | |
| | | | ☐ Check if this is | community property | \$425.0 | 00 \$425.00 |
| | | | (see instructions) | . , , , , , | | _ |
| | | | | | | |
| 4 18/0 | towardt a | iraraft mater hames | ATVs and other recreations | lvahialaa atharvahialaa ana | J | |
| | | | | I vehicles, other vehicles, and els, snowmobiles, motorcycle a | | |
| | • | | | • | | |
| | No | | | | | |
| | Yes | | | | | |
| | | | | | | |
| | | | | | Г | |
| | | | | ries from Part 2, including an | | \$425.00 |
| .pa | iges you r | nave attached for Pari | 2. Write that number here | | => | Ψ-20:00 |
| D-10 | D | - V D | | | | |
| | | e Your Personal and Ho | usehold Items uitable interest in any of the | following itoms? | | Current value of the |
| DO yo | Ja Jwn Or | nave any legal or eq | unable interest in any of the i | ionowing items : | | portion you own? |
| | | | | | | Do not deduct secured |
| 6 H o | usehold o | goods and furnishings | | | | claims or exemptions. |
| J. 110 | assinoid b | joodo una ruminaming | • | | | |

Official Form 106A/B Schedule A/B: Property

□ No

Examples: Major appliances, furniture, linens, china, kitchenware

| Debtor 1 | Case 17-21274 Doc 1 Filed 07 Docur Farnardo Anderson | ment Page 11 of 53 | Ee number (if known) | Desc Main |
|-------------------------------------|--|--|-------------------------|--|
| ■ Yes. | . Describe | | - | |
| | Sectional couch, chair, and a | a bed | | \$500.00 |
| □ No | oles: Televisions and radios; audio, video, stereo, and of including cell phones, cameras, media players, ga | | s, scanners; music coll | |
| | Television | | | \$150.00 |
| Examp | cibles of value oles: Antiques and figurines; paintings, prints, or other a other collections, memorabilia, collectibles . Describe | artwork; books, pictures, or other art | objects; stamp, coin, o | r baseball card collections; |
| Examp. ■ No | nent for sports and hobbies oles: Sports, photographic, exercise, and other hobby e musical instruments Describe | equipment; bicycles, pool tables, golf | clubs, skis; canoes an | d kayaks; carpentry tools; |
| ■ No | ms nples: Pistols, rifles, shotguns, ammunition, and related . Describe | l equipment | | |
| □ No | es nples: Everyday clothes, furs, leather coats, designer w Describe | rear, shoes, accessories | | |
| | Used clothing and shoes | | | \$300.00 |
| ■ No □ Yes. 13. Non-fa Exam | nples: Everyday jewelry, costume jewelry, engagement Describe arm animals nples: Dogs, cats, birds, horses | rings, wedding rings, heirloom jewel | ry, watches, gems, gol | ld, silver |
| | . Describe ther personal and household items you did not alre | oady list including any hoalth aids | you did not list | |
| ■ No | . Give specific information | owy not, moruumy any meann dius | , you aid fiot list | |
| | the dollar value of all of your entries from Part 3, in Part 3. Write that number here | | have attached | \$950.00 |
| | escribe Your Financial Assets | idea (allereia a) | | 0 |
| Do you o | wn or have any legal or equitable interest in any of | the following? | | Current value of the portion you own? Do not deduct secured |

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

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Case number (if known) Document **Farnardo Anderson**

| 16. | Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No |
|-----|---|
| | □ Yes |
| 17. | Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. |
| | ■ No □ Yes Institution name: |
| 18. | Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts |
| | ■ No □ Yes Institution or issuer name: |
| 19. | Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture |
| | ■ No |
| | ☐ Yes. Give specific information about them |
| 20. | Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. |
| | ■ No |
| | Yes. Give specific information about them Issuer name: |
| 21. | Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No |
| | ☐ Yes. List each account separately. |
| | Type of account: Institution name: |
| 22. | Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No |
| | Yes Institution name or individual: |
| 23. | Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) |
| | ■ No □ Yes Issuer name and description. |
| 24. | Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). |
| | ■ No □ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): |
| 25. | Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit |
| | ☐ Yes. Give specific information about them |
| 26. | Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No |
| | Yes. Give specific information about them |
| 27. | Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No |
| | Yes. Give specific information about them |
| N/F | anay or property awad to you? |

Debtor 1

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Case number (if known) Document

Debtor 1 Farnardo Anderson portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$0.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Official Form 106A/B

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Case number (if known) Document Debtor 1 **Farnardo Anderson**

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$425.00 57. Part 3: Total personal and household items, line 15 \$950.00 Part 4: Total financial assets, line 36 58. \$0.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$1,375.00 Copy personal property total \$1,375.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$1,375.00

Official Form 106A/B Schedule A/B: Property page 5

| | | Document | Page 15 of 53 | |
|---|---|--|--|--|
| Fill in this infor | mation to identify your case: | | | |
| Debtor 1 | Farnardo Anderson | | | |
| Debtor 2 | First Name | Middle Name | Last Name | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: NOR | THERN DISTRICT OF | ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| Official Fo | orm 106C | | | |
| | e C: The Prope | rtv You Cla | im as Exempt | 4/16 |
| | • | | • | |
| the property you | listed on Schedule A/B: Property nd attach to this page as many c | (Official Form 106A/B) | together, both are equally responsible f as your source, list the property that yo hal Page as necessary. On the top of an | u claim as exempt. If more space is |
| specific dollar a any applicable s iunds—may be exemption to a p | mount as exempt. Alternativel statutory limit. Some exemptio unlimited in dollar amount. Ho | y, you may claim the f ns—such as those for wever, if you claim an | e amount of the exemption you claim full fair market value of the property b health aids, rights to receive certain exemption of 100% of fair market val ty is determined to exceed that amoun | eing exempted up to the amount of benefits, and tax-exempt retirement ue under a law that limits the |
| <u> </u> | ify the Property You Claim as I | Exempt | | |
| | • | • | n if your spouse is filing with you. | |
| _ | claiming state and federal nonbar | • | , , | |
| _ | - | | 11 0.0.0. § 322(0)(0) | |
| | claiming federal exemptions. 11 | | amut fill in the information helevy | |
| | tion of the property and line on | Current value of the | empt, fill in the information below. Amount of the exemption you claim | Specific laws that allow exemption |
| | S that lists this property | portion you own | | opcome laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| , | dai Sonata 214,000 miles | \$425.00 | \$425.00 | 735 ILCS 5/12-1001(c) |
| Line from So | chedule A/B: 3.1 | | 100% of fair market value, up to any applicable statutory limit | |
| | couch, chair, and a bed | \$500.00 | \$500.00 | 735 ILCS 5/12-1001(b) |
| Line nom 30 | Tredule A/B. U.1 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Television | | \$150.00 | ■ \$150.00 | 735 ILCS 5/12-1001(b) |
| Line from So | chedule A/B: 7.1 | Ψ130.00 | | , , |
| | | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| | ning and shoes | \$300.00 | \$300.00 | 735 ILCS 5/12-1001(a) |
| Line nom oc | medalo A.B. TTT | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| | iming a homestead exemption | | 5? ses filed on or after the date of adjustme | ent.) |
| (Subject to a ■ No | adjustment on 4/01/19 and every | 3 years after that for ca | ases filed on or after the date of adjustme | ent.) |
| _ · | | | | |

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

Official Form 106C

☐ Yes

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Debtor 1 Farnardo Anderson

| Fill in this information to identify your case: | | | | | | |
|---|-----------------|-------------------|-------------|------|------------------|--|
| Debtor 1 | Farnardo Anders | on | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number (if known) | | | | | ck if this is an | |
| | | | | amei | nded filing | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - \square Yes. Fill in all of the information below.

| | | Document | Page 18 of 53 | |
|---|---|--|---|--|
| Fill in this in | nformation to identify your | case: | | |
| Debtor 1 | Farnardo Anderso | on | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| | | | | |
| United States | s Bankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | |
| Case numbe | er | | | Check if this is an amended filing |
| | orm 106E/F e E/F: Creditors W | ho Have Unsecured | Claims | 12/15 |
| any executory Schedule G: E Schedule D: C eft. Attach the name and case | contracts or unexpired leases xecutory Contracts and Unexp reditors Who Have Claims Sec | that could result in a claim. Also I ired Leases (Official Form 106G). I ured by Property. If more space is e. If you have no information to re | FY claims and Part 2 for creditors with NONPRIORITY claims to executory contracts on Schedule A/B: Property (Officon not include any creditors with partially secured claim needed, copy the Part you need, fill it out, number the eport in a Part, do not file that Part. On the top of any add | cial Form 106A/B) and on s that are listed in ntries in the boxes on the |
| 1. Do any cr | editors have priority unsecure | d claims against you? | | |
| ■ No. Go | to Part 2. | | | |
| ☐ Yes. | | | | |
| Part 2: Li | st All of Your NONPRIORIT | Y Unsecured Claims | | |
| □ No. Yo ■ Yes. 4. List all of | your nonpriority unsecured cla | art. Submit this form to the court with | ne creditor who holds each claim. If a creditor has more the | |
| | | | d, identify what type of claim it is. Do not list claims already in have more than three nonpriority unsecured claims fill out th | |
| | | | | Total claim |
| 4.1 Afn i | İ | Last 4 digits of acc | count number | \$1,500.64 |
| 131 PO | riority Creditor's Name 0 Martin Luther King Dr Box 3068 | When was the deb | t incurred? | _ |
| Numb | omington, IL 61702 ber Street City State Zlp Code incurred the debt? Check one. | As of the date you | file, the claim is: Check all that apply | |
| ■ D | ebtor 1 only | ☐ Contingent | | |
| □ D | ebtor 2 only | ☐ Unliquidated | | |
| □ D | ebtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ A | t least one of the debtors and and | other Type of NONPRIOR | RITY unsecured claim: | |
| □с | heck if this claim is for a comr | nunity | | |
| debt Is the | e claim subject to offset? | Obligations arising properties of the contract | ng out of a separation agreement or divorce that you did not ims | |
| ■ _N | • | <u>-i</u> | n or profit-sharing plans, and other similar debts | |
| □ Y | es | Other. Specify | | |

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Case number (if know)

| 4.2 | City of Chicago Dept of Finance | Last 4 digits of account number | \$4,000.00 | | | | |
|-----|--|--|---|----------|--|--|--|
| | Nonpriority Creditor's Name PO Box 88298 Chicago, IL 60680-1298 | When was the debt incurred? | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sep report as priority claims | aration agreement or divorce that you did not | | | | |
| | No | Debts to pension or profit-shari | ng plans, and other similar debts | | | | |
| | Yes | ckets | | | | | |
| 4.3 | Commonwealth Edison Company | Last 4 digits of account number | | \$400.00 | | | |
| | Nonpriority Creditor's Name Bankruptcy Department 1919 Swift Drive | When was the debt incurred? | | | | | |
| | Oakbrook Terrace, IL 60523 Number Street City State Zlp Code | As of the date you file, the claim | | | | | |
| | Who incurred the debt? Check one. | , i.e. ee aa.e , eae,e e.a | To thook all that apply | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | Type of NONPRIORITY unsecured claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sep report as priority claims | | | | | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | | | | |
| | Yes | Other. Specify Electric Ut | | | | | |
| 4.4 | Convergent Outsoucing, Inc | Last 4 digits of account number | 1733 | \$412.00 | | | |
| | Nonpriority Creditor's Name 800 Sw 39th St Renton, WA 98057 | When was the debt incurred? | Opened 08/16 Last Active 01/13 | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| | Debtor 1 only | 1 only Contingent | | | | | |
| | Debtor 2 only | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | | | |
| | lacktriangle At least one of the debtors and another | Type of NONPRIORITY unsecure | | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sep | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | ■ No | ng plans, and other similar debts | | | | | |
| | ☐ Yes ☐ Other. Specify Collection Attorney T-Mobile Usa | | | | | | |

Page 20 of 53 Document Debtor 1 Farnardo Anderson Case number (if know) 4.5 \$617.00 Dept Of Ed/Navient Last 4 digits of account number 0330 Nonpriority Creditor's Name Opened 03/11 Last Active Po Box 9635 When was the debt incurred? 6/30/17 Wilkes Barre, PA 18773 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify **Educational** 4.6 **Dept Of Ed/Navient** Last 4 digits of account number 0307 \$4,521.00 Nonpriority Creditor's Name Opened 03/11 Last Active Po Box 9635 When was the debt incurred? 6/30/17 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Other. Specify ☐ Yes Educational 4.7 Dept Of Ed/Navient Last 4 digits of account number 0307 \$2,161.00 Nonpriority Creditor's Name Opened 03/11 Last Active Po Box 9635 When was the debt incurred? 6/30/17 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community

debt

■ No ☐ Yes

Is the claim subject to offset?

report as priority claims

Other. Specify

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Educational

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| Debto | Farnardo Anderson | | Case number (if know) | | | | |
|-------|--|-------------------------------------|---|----------|--|--|--|
| 4.8 | Enterprise Car Rental | Last 4 digits of account number | | \$200.00 | | | |
| | Nonpriority Creditor's Name 8631 S Cottage Grove Ave | When was the debt incurred? | | | | | |
| | Chicago, IL 60609 | | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt | ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | | | |
| | Yes | Other. Specify Car rental | | | | | |
| 4.9 | H and R Block | Last 4 digits of account number | | \$300.00 | | | |
| | Nonpriority Creditor's Name PO Box 121056 | When was the debt incurred? | | | | | |
| | Dallas, TX 75312 | When was the dept incurred: | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt | ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | | | | |
| | Yes | Other. Specify Fees | | | | | |
| 4.1 | Harvard Collection | Last 4 digits of account number | 9938 | \$692.00 | | | |
| 0 | Nonpriority Creditor's Name | East 4 digits of account number | | Ψ002.00 | | | |
| | 4839 N Elston Ave Chicago, IL 60630 | When was the debt incurred? | Opened 04/17 Last Active 04/13 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | , | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | • | Type of NONPRIORITY unsecured claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt | Obligations arising out of a sepa | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharing | • | | | | |
| | ☐ Yes | ■ Other, Specify Collection | Attorney II Department O | | | | |

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Document Page 22 of 53 Debtor 1 Farnardo Anderson Case number (if know) 4.1 \$400.00 **Hertz Corporation** Last 4 digits of account number Nonpriority Creditor's Name PO Box 121056 When was the debt incurred? Dallas, TX 75312-1056 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Car rental 4.1 Illinois Dept of Transportation \$0.00 Last 4 digits of account number Nonpriority Creditor's Name **Division of Traffic Safety** When was the debt incurred? 3125 Executive Park Drive Springfield, IL 62766 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Notice only **Peoples Gas Light & Coke** 4.1 \$400.00 Company Last 4 digits of account number Nonpriority Creditor's Name 200 E Randolph St When was the debt incurred? Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Gas Bill

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| Debtor | 1 Farnardo Anderson | | Case number (if know) | |
|----------|---|--|---|------------|
| 4.1 4 | Portfolio Recovery Nonpriority Creditor's Name | Last 4 digits of account number | 1516 | \$495.00 |
| | 120 Corporate Blvd Ste 1 Norfolk, VA 23502 | When was the debt incurred? | Opened 12/12 Last Active 11/11 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | ■ Other. Specify Usa Nation | Company Account Chase Bank al Assoc | |
| 4.1 5 | Transit General Insurance | Last 4 digits of account number | | \$5,000.00 |
| | Nonpriority Creditor's Name 5450 N Cumberland Ave Chicago, IL 60656 | When was the debt incurred? | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharir | | |
| | Yes | _ | g plans, and other similar debts | |
| | | — Other. Opcomy | | |
| 4.1 6 | Village of Oak Park Nonpriority Creditor's Name | Last 4 digits of account number | | \$100.00 |
| | 123 Madison Street Oak Park, IL 60302 | When was the debt incurred? | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharir | ng plans, and other similar debts | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify Parking Tickets

☐ Yes

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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| Debtor 1 Farnardo Anderson | Document I | Page 24 of 53 Case number (if know) |
|---|--|--|
| Name and Address Arnold Scott Harris P.C. 111 W Jackson Suite 600 | On which entry in Part 1 or Part 1 or Part 1 or Part 1 or (Check one): | art 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Chicago, IL 60604 | Last 4 digits of account numb | er |
| Name and Address Convergent Outsoucing, Inc Po Box 9004 Renton, WA 98057 | On which entry in Part 1 or Path Line 4.4 of (Check one): | art 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account numb | er |
| Name and Address Dept Of Ed/Navient Attn: Claims Dept P.O. Box 9635 Wilkes Barr, PA 18773 | Line 4.5 of (Check one): | art 2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account numb | |
| Name and Address Dept Of Ed/Navient Attn: Claims Dept P.O. Box 9635 | On which entry in Part 1 or Pa Line 4.6 of (<i>Check one</i>): | art 2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims |
| Wilkes Barr, PA 18773 | Last 4 digits of account numb | per |
| Name and Address Dept Of Ed/Navient Attn: Claims Dept P.O. Box 9635 Wilkes Barr, PA 18773 | On which entry in Part 1 or Pa Line 4.7 of (<i>Check one</i>): | art 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| Wilkes Dall, FA 10773 | Last 4 digits of account numb | per |
| Name and Address Edward N Siskel City of Chicago Corp Counsel 121 N LaSalle St, Ste 600 Chicago, IL 60602 | On which entry in Part 1 or Patt 1 o | art 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| omougo, ie oooe | Last 4 digits of account numb | per |
| Name and Address Harvard Collection Attn: Bankruptcy 4839 N Elston Ave Chicago, IL 60630 | On which entry in Part 1 or Pa Line 4.10 of (<i>Check one</i>): | art 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Chicago, in 60650 | Last 4 digits of account numb | er |
| Name and Address Portfolio Recovery Po Box 41067 | On which entry in Part 1 or Pat Line 4.14 of (Check one): | art 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims |
| Norfolk, VA 23541 | Last 4 digits of account numb | ■ Part 2: Creditors with Nonpriority Unsecured Claims er |
| Part 4: Add the Amounts for Each Type of | | statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each |

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----------------------|-----|---|-----|-------------|
| Total | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |

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| Debtor 1 Farnardo Anderson | | | | nber (if know) | | |
|----------------------------|---|---|--|---|---|--|
| 6f. | Student loans | 6f. | | \$ | 7,299.00 | |
| | | | | | | |
| 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |] . | \$ | 0.00 | |
| 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h | ١. | \$ | 0.00 | |
| 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | · | \$ | 13,899.64 | |
| 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | | \$ | 21,198.64 | |
| | 6f. 6g. 6h. 6i. | 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6i. | 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6g. 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. \$ 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6f. Student loans 6f. \$ 7,299.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6f. \$ 7,299.00 6g. \$ 0.00 6h. \$ 0.00 13,899.64 |

| | | IAAAIII | | |
|---|-------------------------|-------------------|-------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Farnardo Anders | on | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | whom you have the or, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | _ |
| | Name | | | | |
| | Number | Street | | | _ |
| | | | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | |
| | | | | | |
| | | | | | _ |
| | Number | Street | | | |
| | | | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | |
| | | | | | |
| | | | | | |
| | Number | Street | | | |
| | | | | | |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | <u> </u> |
| | ivuilibel | Sileet | | | |
| | City | | State | ZIP Code | <u> </u> |
| | City | | State | ZIF Code | |

| | | Docume | <u>nt Page 27 (</u> | ot 53 | |
|------------------------|---|------------------------------|------------------------|---|---|
| Fill in thi | is information to identify you | ur case: | | | |
| Debtor 1 | Farnardo Ande | rcon | | | |
| Debtor 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, f | | Middle Name | Last Name | | |
| United St | tates Bankruptcy Court for the | : NORTHERN DISTRICT | OF ILLINOIS | | |
| • | | | | | |
| Case nur (if known) | mber | | | | ☐ Check if this is an |
| , | | | | | amended filing |
| | | | | | 3 |
| Officia | al Form 106H | | | | |
| | dule H: Your Co | dobtors | | | 40/45 |
| SCITE | dule n. Toul Co | uentoi 2 | | | 12/15 |
| 1. Do | ne and case number (if know o you have any codebtors? (| , | | e as a codebtor. | |
| ■ No | | | | | |
| Arizo | ithin the last 8 years, have yona, California, Idaho, Louisiar o. Go to line 3. es. Did your spouse, former sp | na, Nevada, New Mexico, Pu | erto Rico, Texas, Wash | | y states and territories include |
| in lir Forn | ne 2 again as a codebtor only n 106D), Schedule E/F (Offic Column 2. | y if that person is a guaran | tor or cosigner. Make | sure you have listed the 166G). Use Schedule D, | g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and | d ZIP Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt es that apply: |
| 3.1 | | | | ☐ Schedule D, line | ۵ |
| 0.1 | Name | | | □ Schedule E/F, I | |
| | | | | ☐ Schedule G, line | |
| | | | | Scriedule G, IIII | |
| | Number Street | 0 | 710.0 | | |
| | City | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, line | |
| 0.2 | Name | | | Schedule E/F, li | |
| | | | | ☐ Schedule E/F, I | |
| | | | | — Scriedule G, IIII | |
| | Number Street | 0 | 715.0 | | |
| | City | State | ZIP Code | | |

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| Fill | in this information to identify y | our case. | | | | | | | | |
|--------------------|---|--|--|-------------|---------------|----------------------|--------------------------------------|---|--|-----------------|
| | | o Anderson | | | | | | | | |
| | btor 2 | | | | _ | | | | | |
| Uni | ited States Bankruptcy Court for | or the: NORTHERN DISTRIC | CT OF ILLINOIS | | _ | | | | | |
| (If ki | fficial Form 106l | | - | | | □ A □ A | | ed filing ent showin as of the fo | g postpetition ollowing date: | · |
| | chedule I: Your I as complete and accurate as | | anle are filing togeth | or (Dobt | or 1 | and Dob | tor 2\ bo | th are equ | ally respons | 12/15 |
| sup spo atta | plying correct information. It use. If you are separated and ich a separate sheet to this formation. It is the separate sheet to the separate sheet | you are married and not fili I your spouse is not filing w orm. On the top of any additi | ng jointly, and your ith you, do not inclu ional pages, write yo | spouse i | s liv nati | ing with on about | you, incl your spour umber (if | ude inforr ouse. If mo known). A | nation about ore space is unswer every | your needed, |
| | information. | | Debtor 1 | | | | | | ling spouse | |
| | If you have more than one jo attach a separate page with information about additional employers. | Employment status Occupation | ☐ Employed ■ Not employed | | | | ☐ Empl | oyea mployed | | |
| | Include part-time, seasonal, self-employed work. | • | | | | | | | | |
| | Occupation may include stude or homemaker, if it applies. | dent Employer's address | | | | | | | | |
| | | How long employed t | here? | | | | _ | | | |
| Pai | rt 2: Give Details Abou | t Monthly Income | | | | | | | | |
| | imate monthly income as of tuse unless you are separated. | he date you file this form. If | you have nothing to r | eport for | any | line, write | \$0 in the | space. Ind | clude your nor | n-filing |
| • | ou or your non-filing spouse hare space, attach a separate she | | ombine the informatio | n for all e | emplo | oyers for | that perso | on on the li | nes below. If y | you need |
| | | | | | | For Del | otor 1 | | btor 2 or ng spouse | |
| 2. | | salary, and commissions (b thly, calculate what the month | | 2. | \$ | | 0.00 | \$ | N/A | |
| 3. | Estimate and list monthly | overtime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. A | dd line 2 + line 3. | | 4. | \$ | | 0.00 | \$ | N/A | |

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| Debt | or 1 | Farnardo Anderson | - | Case r | number (<i>if known</i>) | | | |
|------|--------------|--|-------------------|--------|----------------------------|-------------------|---------------------|---------|
| | | | | For | Debtor 1 | For Del | otor 2 or | |
| | | | | . 0. | Debtor 1 | | ng spouse | |
| | Сор | by line 4 here | 4. | \$ | 0.00 | \$ | N/A | |
| 5. | List | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 0.00 | \$ | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | N/A | |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$ | N/A | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | N/A | |
| • | 5h. | Other deductions. Specify: | _ ^{5h.+} | · — | | + \$ | N/A | |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 0.00 | \$ | N/A | |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0.00 | \$ | N/A | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross | | | | | | |
| | | receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | O.L. | monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | | | | | | |
| | | settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | N/A | |
| | 8d. | Unemployment compensation | 8d. | \$ | 975.00 | \$ | N/A | |
| | 8e. | Social Security | 8e. | \$ | 326.00 | \$ | N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Link Card | e 8f. | \$ | 16.00 | \$ | N/A | |
| | 8g. | Pension or retirement income | — 8g. | \$ | 0.00 | \$ | N/A | |
| | 8h. | Other monthly income. Specify: Tax Refunds | 8h.+ | \$ | 596.08 | + \$ | N/A | |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 1,913.08 | \$ | N/A | |
| 10. | Calc | culate monthly income. Add line 7 + line 9. | 10. \$ | | 1,913.08 + \$ | | I/A = \$ 1 | ,913.08 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | ' | | <u> </u> | | ,010.00 |
| 11. | othe Do r | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | depen | • | • | ed in <i>Sche</i> | edule J. 11. +\$ | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | , if it | | ,913.08 |
| | | | | | | | Combine monthly | |
| 13. | Do y | you expect an increase or decrease within the year after you file this form No. | ? | | | | monuny | come |
| | | Yes. Explain: Debtor shall start working with a temp agency be | eginni | ng or | July 26, 201 | 7. | | |

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| Fill | in this information to identify your case: | | | | | | |
|------------|---|-----------------------|---|-----------------|--|--|--|
| Deb | tor 1 Farnardo Anderson | | Check | if this is: | | | |
| | tor 2 buse, if filing) | | ☐ An amended filing☐ A supplement showing postpetition chapter13 expenses as of the following date: | | | | |
| Unit | ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLING | DIS | | MM / DD / YYYY | | | |
| | e number nown) | | | | | | |
| O | fficial Form 106J | | | | | | |
| S | chedule J: Your Expenses | | | | 12/15 | | |
| Be info | as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this f nber (if known). Answer every question. | | | | | | |
| Par 1. | t 1: Describe Your Household Is this a joint case? | | | | | | |
| 1. | No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household? ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses | for Separate House | ehold of Debto | or 2. | | | |
| 2. | Do you have dependents? ☐ No | , | | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | Dependent's relati | | Dependent's age | Does dependent live with you? | | |
| | Do not state the dependents names. | Son | | 16 | □ No ■ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No | | |
| 3. | Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes | | | | ☐ Yes | | |
| Est | t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a suppolicable date. | | | | | | |
| the | lude expenses paid for with non-cash government assistance if value of such assistance and have included it on <i>Schedule I: Y</i> ficial Form 106I.) | | | Your expe | enses | | |
| 4. | The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot. | nclude first mortgage | 4. \$ | | 600.00 | | |
| | If not included in line 4: | | | | | | |
| | 4a. Real estate taxes | | 4a. \$ | | 0.00 | | |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 0.00 | | |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ 4d. \$ | | 0.00 | | |
| 5. | Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hor | ne equity loans | 4a. \$ 5. \$ | | 0.00 | | |

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| ebtor 1 Farnardo Anders | on | Case num | ber (if known) | |
|-----------------------------|--|------------------|---------------------------------------|----------|
| Utilities: | | | | |
| 6a. Electricity, heat, natu | ıral gas | 6a. | \$ | 150.00 |
| 6b. Water, sewer, garbag | <u> </u> | 6b. | \$ | 0.00 |
| | e, Internet, satellite, and cable services | 6c. | \$ | 50.00 |
| 6d. Other. Specify: | .,,, | 6d. | \$ | 0.00 |
| Food and housekeeping | sunnlies | 7. | \$ | 512.00 |
| Childcare and children's | • • | 8. | \$ | 0.00 |
| Clothing, laundry, and dry | | 9. | \$ | 138.00 |
| • | | 10. | \$ | |
| Personal care products a | | | · - | 30.00 |
| Medical and dental expen | | 11. | \$ | 30.00 |
| | as, maintenance, bus or train fare. | 12. | \$ | 180.00 |
| Do not include car payment | reation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| | | | · | |
| Charitable contributions | and rengious donations | 14. | \$ | 0.00 |
| Insurance. | educted from your pay or included in lines 4 or 20. | | | |
| 15a. Life insurance | educted from your pay or included in lines 4 of 20. | 15a. | \$ | 0.00 |
| 15b. Health insurance | | 15a. 15b. | · | 0.00 |
| | | | · | |
| 15c. Vehicle insurance | ,, | 15c. | | 73.00 |
| 15d. Other insurance. Spe | | 15d. | \$ | 0.00 |
| Specify: | s deducted from your pay or included in lines 4 or 2 | 0. 16. | \$ | 0.00 |
| Installment or lease paym | | | • | |
| 17a. Car payments for Ve | | 17a. | · — | 0.00 |
| 17b. Car payments for Ve | hicle 2 | 17b. | · · · · · · · · · · · · · · · · · · · | 0.00 |
| 17c. Other. Specify: | | 17c. | \$ | 0.00 |
| 17d. Other. Specify: | | 17d. | \$ | 0.00 |
| | y, maintenance, and support that you did not repon line 5, <i>Schedule I, Your Income</i> (Official Form | | \$ | 0.00 |
| Other payments you make | e to support others who do not live with you. | | \$ | 0.00 |
| Specify: | | 19. | | |
| Other real property exper | ses not included in lines 4 or 5 of this form or o | n Schedule I: Yo | our Income. | |
| 20a. Mortgages on other p | property | 20a. | \$ | 0.00 |
| 20b. Real estate taxes | | 20b. | \$ | 0.00 |
| 20c. Property, homeowne | r's, or renter's insurance | 20c. | \$ | 0.00 |
| 20d. Maintenance, repair, | | 20d. | \$ | 0.00 |
| | ation or condominium dues | 20e. | \$ | 0.00 |
| Other: Specify: | | | +\$ | 0.00 |
| Calculate your monthly ex | - | | | |
| 22a. Add lines 4 through 21 | | | \$ | 1,763.00 |
| 22b. Copy line 22 (monthly | expenses for Debtor 2), if any, from Official Form 1 | 06J-2 | \$ | _ |
| 22c. Add line 22a and 22b. | The result is your monthly expenses. | | \$ | 1,763.00 |
| Calculate your monthly n | et income. | | | |
| 23a. Copy line 12 (your co | ombined monthly income) from Schedule I. | 23a. | \$ | 1,913.08 |
| | xpenses from line 22c above. | 23b. | -\$ | 1,763.00 |
| | y expenses from your monthly income. | 00 | ¢ | 150.08 |
| The result is your mo | onthly net income | 23c. | Ф | 150.08 |

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ Yes.

Explain here: Debtor takes care of his brother and mother however they have a seperate finanical household.

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| Fill in this | information to identify you | r case: | | | |
|--------------------------------|--|----------------------------|-----------------------------|----------------------------|---|
| Debtor 1 | Farnardo Ander | | | | |
| 2 0 2 10 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRIC | T OF ILLINOIS | | |
| Case numb | per | | | | ☐ Check if this is an amended filing |
| | Form 106Dec | | | | |
| Decla | ration About | an Individua | l Debtor's Sc | hedules | 12/15 |
| | oth. 18 U.S.C. §§ 152, 1341, | | ikruptcy case can result ii | 1 times up to \$250,000, c | or imprisonment for up to 20 |
| Did yo | ou pay or agree to pay som | eone who is NOT an atto | rney to help you fill out b | ankruptcy forms? | |
| ■ N | No | | | | |
| □ Y | es. Name of person | | | | otcy Petition Preparer's Notice, and Signature (Official Form 119) |
| | penalty of perjury, I declar ey are true and correct. | e that I have read the sur | nmary and schedules filed | d with this declaration a | and |
| X /s/ | / Farnardo Anderson | | X | | |
| | arnardo Anderson gnature of Debtor 1 | | Signature of | Debtor 2 | |

Date _____

Date July 18, 2017

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| Fill | l in this inform | nation to identify you | r case: | | | |
|-------------------|-----------------------------------|---|--|---|--|---|
| | btor 1 | Farnardo Ander | | | | |
| | DIOI I | First Name | Middle Name | Last Name | | |
| | btor 2 buse if, filing) | First Name | Middle Name | Last Name | | |
| Un | ited States Bar | nkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Ca | se number | | | | | |
| | nown) | | | | | heck if this is an mended filing |
| Ωſ | ficial For | m 107 | | | | |
| | | | Affairs for Indivi | duals Filing for B | ankruptcy | 4/16 |
| info nun | ormation. If months | ore space is needed,). Answer every que | attach a separate sheet to | this form. On the top of any | equally responsible for sup | |
| 1. | · | current marital statu | | LIVEU BEIOIC | | |
| | ☐ Married ■ Not marri | | | | | |
| 2. | During the la | ıst 3 vears. have vou | lived anywhere other than | where vou live now? | | |
| | ■ No □ Yes. List | all of the places you l | ived in the last 3 years. Do n | ot include where you live now | <i>'</i> . | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. stat | | | | | ity property state or territory co, Texas, Washington and W | |
| | ■ No □ Yes Ma | ke sure vou fill out <i>Scl</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | |
| | | • | , | motern com room. | | |
| Pa | rt 2 Explain | n the Sources of You | r Income | | | |
| 4. | Fill in the tota | I amount of income yo | u received from all jobs and a | ng a business during this yeall businesses, including parter together, list it only once ur | | ndar years? |
| | □ No ■ Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | r last calendar inuary 1 to De | year: cember 31, 2016) | ■ Wages, commissions, bonuses, tips | \$15,629.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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Case number (if known) Document Debtor 1 Farnardo Anderson

| | | Debtor 1 | | Debtor 2 | |
|---|---|--|---|---|--|
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| For the calendar yea (January 1 to Decen | | ■ Wages, commissions, bonuses, tips | \$7,710.00 | ☐ Wages, commission bonuses, tips | ons, |
| | | ☐ Operating a business | | ☐ Operating a busine | ess |
| Include income re and other public winnings. If you a | egardless of wheth benefit payments; are filing a joint cas and the gross inco | | amples of other income are a rest; dividends; money collec- you received together, list it of | limony; child support; Soted from lawsuits; royalt only once under Debtor | ocial Security, unemployment ties; and gambling and lottery 1. |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| From January 1 of c the date you filed fo | | Food Stamps | \$64.00 | | |
| | | Unemployment Compensation | \$6,300.00 | | |
| | | Social Security Income | \$1,956.00 | | |
| Part 3: List Certa | in Pavments You | Made Before You Filed for | Bankruptcv | | |
| S. Are either Debto | or 1's or Debtor 2 er Debtor 1 nor D | 's debts primarily consume | r debts? ımer debts. Consumer debt | s are defined in 11 U.S.0 | C. § 101(8) as "incurred by an |
| Durin | a the 90 days hefo | re you filed for bankruptcy, di | d you pay any creditor a tota | Lof \$6 425* or more? | |
| □ N | • | | a you pay any orounor a tota | 0. 40, | |
| | es List below e paid that crent not include | each creditor to whom you pai editor. Do not include paymer payments to an attorney for the ton 4/01/19 and every 3 years | nts for domestic support obliquis bankruptcy case. | gations, such as child su | pport and alimony. Also, do |
| | | r both have primarily consure you filed for bankruptcy, di | | I of \$600 or more? | |
| ■ 1 | No. Go to line 7 | | | | |
| | es List below e | each creditor to whom you pai | | | aid that creditor. Do not do not include payments to an |
| Creditor's Nam | e and Address | Dates of payme | nt Total amount | Amount you Was | s this payment for |

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Case number (if known) Document Debtor 1 Farnardo Anderson

| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. | | | | | | | |
|-----|---|------------------------------|----------------------|----------------------|--------------------|-----------------------|--|--|
| | ☐ Yes. List all payments to an insider. Insider's Name and Address | Dates of payment | Total amount | Amount you | Reason for | this payment | | |
| | | | paid | still owe | | | | |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos | | ments or transfer a | any property on a | ccount of a d | ebt that benefited an | | |
| | No☐ Yes. List all payments to an insider | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment | | |
| Dat | t 4: Identify Legal Actions, Repossession | ns and Foreclosures | paid | Still OWE | molade cred | illoi s riairie | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | ne case | | |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. | | erty repossessed, f | foreclosed, garnis | hed, attache | d, seized, or levied? | | |
| | Creditor Name and Address | Describe the Property | | | | Value of the property | | |
| | | Explain what happened | I | | | property | | |
| 11. | accounts or refuse to make a payment bed No Yes. Fill in the details. | | - | | | | | |
| | Creditor Name and Address | Describe the action the | creditor took | taken | action was | Amount | | |
| | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes List Certain Gifts and Contributions | | erty in the possess | ion of an assigne | e for the ben | efit of creditors, a | | |
| | Within 2 years before you filed for bankrup | atev. did you give any gifts | with a total value | of more than ¢co | nor norsen | 2 | | |
| 13. | ■ No | ocy, did you give any gins | s with a total value | of more than \$60 | o per person | f | | |
| | Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person | Describe the gifts | | Dates the g | s you gave ifts | Value | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | |

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Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid **Address**

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

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Debtor 1 Farnardo Anderson

| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. | | | | | |
|--|---|---|-----------------------------|------------------------|---|---|
| | ☐ Yes. Fill in the details. Person Who Received Transfer Address | Description and v property transferr | | payme | ibe any property or ents received or debts n exchange | Date transfer was made |
| | Person's relationship to you | | | | · · | |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of trust Description and value of the property transferred | | ferred | Date Transfer was made | | |
| | t 8: List of Certain Financial Accounts, Instruction 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or | were any financial ac | counts or instru | ıments he | ld in your name, or for yo | |
| | houses, pension funds, cooperatives, associa No Yes. Fill in the details. | | | | , Shares III banks, Credit | umons, brokerage |
| | | ast 4 digits of account number | Type of accou instrument | nt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 ye cash, or other valuables? No Yes. Fill in the details. | ar before you filed for | bankruptcy, an | y safe dep | oosit box or other deposi | tory for securities, |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, St | | Describe | the contents | Do you still have it? |
| 22. | Have you stored property in a storage unit or | State and ZIP Code) place other than your | home within 1 | year befor | e you filed for bankruptc | y? |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, State and ZIP Code) | | Describe | the contents | Do you still have it? |
| Par | t 9: Identify Property You Hold or Control fo | or Someone Else | | | | |
| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | | or, or hold in trust |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe | the property | Value |
| Par | t 10: Give Details About Environmental Infor | mation | | | | |
| For | the purpose of Part 10, the following definition | ns apply: | | | | |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 Farnardo Anderson

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

| Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Lip Code) No Lip Code Yes. Fill in the details. | | hazardous material, pollutant, contaminant, or similar term. | | | | | | |
|--|---|--|--|---------------------------------------|------------------|--|--|--|
| No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Court or agency Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) And Street, City, State and ZIP Code) Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? No An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name Describe the nature of the business Name of accountant or bookkeeper Do not include Social Security number or ITIN. Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | Rep | Report all notices, releases, and proceedings that you know about, regardless of when they occurred. | | | | | | |
| Yes. Fill in the details. Name of site | 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law | | | | | | | |
| Address (Number, Street, City, State and ZiP Code) Address (Number, Street, City, State and ZiP Code) Address (Number, Street, City, State and ZiP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZiP Code) No Yes. Fill in the details. Case Title Case Number Case Number Address (Number, Street, City, State and ZiP Code) Address (Number, Street, City, State and ZiP Code) Name Address (Number, Street, City, State and ZiP Code) Address (Number, Street, City, State and ZiP Code) Nature of the case Status of the case Address (Number, Street, City, State and ZiP Code) A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Name of accountant or bookkeeper Employer Identification number Do not include Social Security number or ITIN. Dates business existed 8. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | | _ | | | | | | |
| No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title | | | Address (Number, Street, City, State and | | Date of notice | | | |
| Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) Name Nature of the case Status of the case Status of the case Status of the case Status of the case State of the case Sta | 25. | Have you notified any governmental unit of any | release of hazardous material? | | | | | |
| Address (Number, Street, City, State and ZIP Code) ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Nu | | _ ``` | | | | | | |
| No Yes. Fill in the details. Case Title Case Number Rame Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Describe the nature of the business Name of accountant or bookkeeper Employer Identification number Do not include Social Security number or ITIN. Dates business existed | | | Address (Number, Street, City, State and | | Date of notice | | | |
| Yes. Fill in the details. Case Title | 26. | Have you been a party in any judicial or adminis | strative proceeding under any envi | ronmental law? Include settlements a | nd orders. | | | |
| Case Number Name | | _ | | | | | | |
| 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Describe the nature of the business Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Do not include Social Security number or ITIN. Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No | | | Name Address (Number, Street, City, | Nature of the case | | | | |
| □ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the business Name of accountant or bookkeeper Employer Identification number Do not include Social Security number or ITIN. Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ■ No Yes. Fill in the details below. Name Date Issued | Par | <u> </u> | | | | | | |
| □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the business Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Date Issued Date Issued | 27. | Within 4 years before you filed for bankruptcy, o | did you own a business or have an | y of the following connections to any | business? | | | |
| □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Amount of the business partnership on the parties. Employer Identification number point include Social Security number or ITIN. Dates business existed No □ Yes. Fill in the details below. Name Date Issued | | | | | | | | |
| An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Employer Identification number Do not include Social Security number or ITIN. Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued | | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | |
| □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Date Issued | | ☐ A partner in a partnership | | | | | | |
| No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued | | ☐ An officer, director, or managing executive of a corporation | | | | | | |
| Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Employer Identification number Do not include Social Security number or ITIN. Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued | | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | |
| Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Describe the nature of the business Name of accountant or bookkeeper Dates business existed Employer Identification number Do not include Social Security number or ITIN. Dates business existed No Yes. Fill in the details below. Name Date Issued | | ■ No. None of the above applies. Go to Part 12. | | | | | | |
| Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued | | Yes. Check all that apply above and fill in the details below for each business. | | | | | | |
| Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued | | | scribe the nature of the business | | | | | |
| 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued | | | me of accountant or bookkeeper | | iumber of friiv. | | | |
| institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued | 20 | | | | | | | |
| ☐ Yes. Fill in the details below. Name Date Issued | 20. | | uiu you give a illianciai statement t | o anyone about your business: inclu | ue an illianciai | | | |
| | | | | | | | | |
| (Number, Street, City, State and ZIP Code) | | Name Date Address | te Issued | | | | | |

Part 12: Sign Below

Best Case Bankruptcy

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Case number (if known) Document

Debtor 1 Farnardo Anderson

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| /s/ Farnardo Anderson | |
|--|---|
| Farnardo Anderson | Signature of Debtor 2 |
| Signature of Debtor 1 | |
| Date July 18, 2017 | Date |
| Did you attach additional pages to You | r Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| No | |
| ☐ Yes | |
| Did you pay or agree to pay someone v | who is not an attorney to help you fill out bankruptcy forms? |
| No | |
| ☐ Yes. Name of Person Attach t | he Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - Services provided by Debtor's counsel in preparation of the petition and costs associated with the filing of the case make it more efficient for Debtor and the Attorney to enter into and advanced payment retainer. Debtor's counsel reserves the right to refuse to enter into a security retainer due to the up-front costs associated with filing a Chapter 13 Bankruptcy. If any portion of the retainer is not considered earned or required for expenses it will be refunded to the client.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$400.00 toward the flat fee, leaving a balance due of \$3,600.00; and \$50.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | right to appear in court to object. | |
|--------------------------------------|-------------------------------------|--|
| Signed: | | |
| /s/ Farnardo Anderson | /s/ Mehul D. Desai | |
| Farnardo Anderson | Mehul D. Desai | |
| | Attorney for the Debtor(s) | |
| Debtor(s) | | |
| Do not sign this agreement if the am | nounts are blank. | |

Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | Farnardo Anderson | | Case No. | | |
|----------------|---|---|----------------------|---------------------------|--------------|
| | | Debtor(s) | Chapter | 13 | |
| | DISCLOSURE OF COMPE | ENSATION OF ATTOR | RNEY FOR D | EBTOR(S) | |
| C | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filiple rendered on behalf of the debtor(s) in contemplation | ing of the petition in bankruptcy, | or agreed to be paid | to me, for services rend | ered or to |
| | For legal services, I have agreed to accept | | | 4,000.00 | |
| | Prior to the filing of this statement I have received | | \$ | 400.00 | |
| | Balance Due | | \$ | 3,600.00 | |
| 2. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | ■ I have not agreed to share the above-disclosed com | pensation with any other person | unless they are men | bers and associates of m | ıy law firm. |
| | ☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na | | | | firm. A |
| 5. | In return for the above-disclosed fee, I have agreed to r | render legal service for all aspect | s of the bankruptcy | case, including: | |
| t | Analysis of the debtor's financial situation, and rend Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credit [Other provisions as needed] | ntement of affairs and plan which | may be required; | | otcy; |
| 5. I | By agreement with the debtor(s), the above-disclosed for | ee does not include the following | service: | | |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of an ankruptcy proceeding. | ny agreement or arrangement for | payment to me for | representation of the deb | tor(s) in |
| Jı | uly 18, 2017 | /s/ Mehul D. Desa | i | | |
| \overline{D} | ate | Mehul D. Desai Signature of Attorne Swanson & Desa 2314 W North Ave Chicago, IL 60647 | i, LLC Unit C-1W | | |
| | | 312-666-7882 Fa kswanson@swar Name of law firm | x: 312-666-8894 | | _ |

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United States Bankruptcy Court Northern District of Illinois

| In re | Farnardo Anderson | | Case No. | |
|-------|--|---|---------------------|-----------------------|
| | | Debtor(s) | Chapter 13 | |
| | VE | RIFICATION OF CREDITOR MA | ATRIX | |
| | | Number of C | Creditors: | 20 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credito | rs is true and corr | ect to the best of my |
| Date: | July 18, 2017 | /s/ Farnardo Anderson Farnardo Anderson Signature of Debtor | | |

Afni 1310 Martin Luther King Dr PO Box 3068 Bloomington, IL 61702

Arnold Scott Harris P.C. 111 W Jackson Suite 600 Chicago, IL 60604

City of Chicago Dept of Finance PO Box 88298 Chicago, IL 60680-1298

Commonwealth Edison Company Bankruptcy Department 1919 Swift Drive Oakbrook Terrace, IL 60523

Convergent Outsoucing, Inc 800 Sw 39th St Renton, WA 98057

Convergent Outsoucing, Inc Po Box 9004 Renton, WA 98057

Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773

Dept Of Ed/Navient Attn: Claims Dept P.O. Box 9635 Wilkes Barr, PA 18773

Edward N Siskel City of Chicago Corp Counsel 121 N LaSalle St, Ste 600 Chicago, IL 60602

Enterprise Car Rental 8631 S Cottage Grove Ave Chicago, IL 60609 H and R Block PO Box 121056 Dallas, TX 75312

Harvard Collection 4839 N Elston Ave Chicago, IL 60630

Harvard Collection Attn: Bankruptcy 4839 N Elston Ave Chicago, IL 60630

Hertz Corporation PO Box 121056 Dallas, TX 75312-1056

Illinois Dept of Transportation Division of Traffic Safety 3125 Executive Park Drive Springfield, IL 62766

Peooples Gas Light & Coke Company 200 E Randolph St Chicago, IL 60601

Portfolio Recovery 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Portfolio Recovery Po Box 41067 Norfolk, VA 23541

Transit General Insurance 5450 N Cumberland Ave Chicago, IL 60656

Village of Oak Park 123 Madison Street Oak Park, IL 60302